PART B - FEE(S) TRANSMITTAL Complete and send the form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents DEC 17 2007 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form abould be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All through 5 should be completed where appropriate. All through 5 should be completed where appropriate and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 4743 7590 09/17/2007 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. MARSHALL, GERSTEIN & BORUN LLP 233 S. WACKER DRIVE, SUITE 6300 **SEARS TOWER** CHICAGO IL 60606 12/18/2007 RMERRIHI 00000048 10626081 (Depositor's name (Signature 1440.00 OP 01 FC:1501 02 FC:1504 03 FC:8001 300.00 DP December 2007 (Date) 9.00 OP APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO FILING DATE 10/626,081 07/24/2003 David C. Eby 29618/38938 TITLE OF INVENTION: TASK TRAYS **ISSUE FEE DUE** PUBLICATION FEE DUE PREV. PAID ISSUE FEE DATE DUE APPLN. TYPE SMALL ENTITY TOTAL FEE(S) DUE \$1740.00 \$1440.00 NO \$300 \$0 12/17/2007 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS ELOSHWAY, NIKI MARINA 3781 206-515000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys <sup>1</sup>Marshall. ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, <sup>2</sup>Gerstein & (2) the name of a single firm (having as a member a Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. <sup>3</sup>Borun LLP Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wooster, Ohio Rubbermaid Incorporated 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fce(s) are submitted:

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2855 (enclose an extra copy of this form).

Authorized Signature Leafl. Kriegel

Typed or printed name Jeremy R. Kriegel

Registration No. 39,257

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Publication Fee (No small entity discount permitted)

X Issue Fee

Advance Order - # of Copies